

United States Department of Agriculture

Animal and Plant Health Inspection Service

Policy and Program Development 4700 River Road, Unit 152 Riverdale, MD 20737-1237 Telephone: 301/734-8963

IO09048

ENQL 7-1 CY9 **PERMANEN** Retire 08/0

August 12, 1990

UPDATE OF

Document Processing Desk [6(a)(2)] Office of Pesticide Programs (7504C) U.S. Environmental Protection Agency 401 M Street, S.W. Washington, DC 20460-0001

Attn:

Norman Spurling

SUBJECT:

6(a)(2) Report: adverse effects incident

Revision: reporting period, March 1999 - May 31, 1999

Dear Sir:

In accordance with section 6(a)(2) of the Federal Insec icide, Fungicide and Rodenticide Act, 40 CFR, Part 159.184, USDA APHIS submitted an aggregate adverse effects incident report for the reporting period, March 1, 1999 - May 31, 1999 to the EPA on July 15, 1999. On July 29, 1999, USDA APHIS submitted a revised cover letter to the EPA by 'acsimile per our telephone conversation of that date. Upon further review, we concluded our original report of four D-A incidents for the reporting period is correct. Please accept this letter correcting our revised cover letter submission of July 29, 1999 us a number count for incidents in Joogo48

For your reference, duplicate copies of the supplemental reports pertaining to the adverse effects incidents for the reporting period are attached as well as copies of the original and revised cover letters. Please direct any questions pertaining to this submission to Shirley Wager Pagé at (301) 734-5174 or e-mail Shirley. A. Wager-Pagé (a) usda.gov.

Sincerely,

Carl Bauséh

Acting Team Leader, Data Support Policy and Program Development

Enclosure

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and Program Development

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Animal and Plant Health Inspection Service

Policy and Program Development 4700 River Road, Unit 152

Riverdale, MD 20737-1237 Telephone: 301/734-8963

> ENOL 7-1 CV99 PERMANENT Retire 07/04

July 15, 1999

Document Processing Desk [6(a)(2)] Office of Pesticide Programs (7504C) U.S. Environmental Protection Agency 401 M Street, S.W. Washington, DC 20460-0001

SUBJECT:

6(a)(2) Report: adverse effects incident

revised version of ilata originally submitted in Torsport

Dear Sir:

In accordance with section 6(a)(2) of the Federal Insecticide, Fungicide and Rodenticide Act, 40 CFR, Part 159.184, USDA, APHIS is submitting an aggregate adverse effects incident report for the following pesticide products for the reporting period, March 1, 1999 - May 31, 1999:

-001

EPA Reg. No. 56228-15

Active Ingredient: Sodium Cyanide

M-44 Cyanide Capsules CAS no. 143-33-9

Incident Category

D-A W-B No. of Incidents

5

10:02

EPA Reg. No. unknown

Active Ingredient: Zinc Phosphide

CAS no. 1314-84-7

Incident Category D-C

No. of Incidents

Supplemental reports pertaining to the adverse effects incidents for this reporting period are attached. Please direct any questions pertaining to this adverse effects incident report to Shirley Wager Pagé at (301) 734-5174 or e-mail Shirley. A. Wager-Pagé (a/usda.gov.

Sincerely,

norman

Carl Bausch

Acting Team Leader, Data Support Policy and Program Development

Enclosure



APHIS- Protecting American Agriculture Opportunity Employer





United States
Department of
Agriculture

Animal and Plant Health Inspection Service

Policy and Program Development 4700 River Road, Unit 152 Riverdale, MD 20737–1237 Telephone: 301/734–8963

> ENQL 7-1 CY99 PERMANENT Retire 07/04

> > July 29, 1999

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Document Processing Desk [6(a)(2)]
Office of Pesticide Programs (7504C)
U.S. Environmental Protection Agency
401 M Street, S.W.
Washington, DC 20460-0001

ATTN:

Norman Spurling

SUBJECT:

6(A)(2) report: adverse effects incident; revised cover letter in replacement of July 15, 1999 cover letter per our telephone

conversation of July 29, 1999

Dear Mr. Spurling:

In accordance with Section 6(a)(2) of the Federal Insecticide, Fungicide and Rodenticide Act. 40 CFR, Part 159.184, USDA APHIS is submitting an aggregate adverse effects incident report for the following pesticide products for the reporting period of March 1, 1999 through May 31, 1999:

EPA Reg. No. 56228-15

Active Ingredient: Sodium Cyanide

M-44 Cyanide Capsules CAS No. 143-33-9

Incident Category
D-A

DC HD W-B No. of Incidents

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EPA Reg. No. unknown

Active Ingredient: Zinc Phosphide

CAS No. 1314-84-7

Incident Category

D-C

No. of Incidents

Supplemental reports pertaining to the adverse effects incidents for this reporting period are attached. Please direct any questions pertaining to this adverse effects incident report to Shirley Wager Pagé at (301) 734-5174 or e-mail shirley.a.wager-page@usda.gov.

Sincerely.

Carl Bausch

Acting Team Leader. Data Support Policy and Program Development

Enclosures

APHIS- Protecting American Agriculture

An Equal Opportunity Employe

COPY ANIMAL AND

U.S. DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE WILDLIFE SERVICES

DUPLICA	TC.	OF
100890		

INCIDENT CODE	6(a)(2) AD\	VERSE EFFECTS INC	DENT INF			- 70	1 002
	Date		ele of last subm	OF THE INCIDENT	AWARE	_	T USE ONLY
D-C	X New 6-9-99	Update		5-18-99		REPORT	NUMBER
EMPLOYEE NAME (To contac	et for additional information)	TELEPHONE NUMBER		ME (if Non-APHIS or different	íram	TELEPH	ONE NUMBER
Sherm Blom		(208) 236-6920 Ext. 103	reporter)				
DUTY STATION ADDRESS		LAC. 10J	ADDRESS				
USDA Pocatello S 238 E Dillon St	,, -						
Pocatello, ID 8	3201 INCIDENT LOCATION		SOURCE OF	INFORMATION			
CITY	STATE	COUNTY	1				
	ID	Minnidoka	Self Med	Telephone Call Oral Report	Letter	FAX	
EXPOSURE TYPE (Examples	include spill spiesh drift ner	off or other)	""		X Other	ТАЛ	
Nontartet inges		on on one					
agricultural (specify crop), ra (specify), recreational area (sp	ogeland/pasture, noncrop s	aldential aites, forest/woods, tree, fallow field, public lands highway)]	equipment, du	RELATING TO PRODUCT As bring/loading, reantly, during to ring manufacturing/formulation) ontarget ingesti	ansport, répa	CIDENT: iir/mainter	(examples include ance of application
EPA REGISTRATION NUMBER	R FRODUCT NAME			ACTIVE INGREDIENT			
Unknown	Unknown Zinc Phosphide on Wheat			Zinc Phosphide			
WAS THE PRODUCT	WHAT WAS THE	DILUTION RATIO (if applicable)	WERE THE LABEL	WAS T	E APPLI	ATOR
Concentrated X Diluted Unkn		own		l ()		ED (If ap	
IS THERE EVIDENCE OF INTE	ENTIONAL MISUSE (If "Yes",	explain)		Unkw	n [L_] ''	· <u> </u>	Unkwn
Yes X No							
SUMMARY OF THE INCIDENT INFOTRAC FAXed re a neighbor's comp rodents that had INFOTRAC for tech did not provide a or would consume	port to S. Blom laint of his do consumed the banical information additional in	gs bleeding after it. cal on. S. Blom call nformation. He o	consumiled the led led led led led led led led led le	ng zinc phosphid local county ext 5-26-99 for d whether the ne	e on wh ension more de ighbor'	eat b agent tails s dog	ait and
NAME OF PREPARER	sic	NATURE		TELEPHONE NUMBER	r	ATE	
Sherm Blom		Sta 12- 134	=>	(208) 236-6920	-		0.0
NAME OF SUPERVISOR	Sic	NATURE /	(Ext. 103 TELEPHONE NUMBER		6-9-	99
Mark Collinge		Wall Alle		(208) 378-5077		,	11-00
WS FORM 100 (DRAFT)		we duny	e	(2007) 370-3077		6-	77

			DST US	
DOMESTIC ANIMAL, FAUNA, OR FLO	DRA INCIDENT - SUPPLEM	ENTAL REPORT FORM	REPORT NUMBER	₹
ONE		"X" ONE	NUMBER OR ACR	ES AFFERM
Amphibian Fish Gird X Mammei	Invertabrists Raptile Plant		Unknown	
CIES COMMON NAME Domestic Dog		BREED (If known) Unknown	<u> </u>	
CRIBE SIGNS, SYMPTOMS, ADVERSE EFFECTS		Olikitowii		
ogs were allegedly bleeding afthat had consumed the bait.	ter consuming zinc ph	osphide-treated whea	t bait and r	odents
ABORATORY TESTS WERE PERFORMED, LIST NAME	OF TEST(S) AND RESULTS (if availab	ole, attach copies):		· <u>,</u>
Unkno	own			
CMVIDE OF THE FEVER !				
GNITUDE OF THE EFFECT (e.g., miles of streams, squa	we area of terrestrial habitat)			
Unknown				
STICIDE APPLICATION RATE AND METHOD OF APPLIC	CATION (Include brief description of bail	ling if applicable)		
Unknown		•		
S PREBAITING USED ON THE SITE (Clascribe)				
Yes No Unknown				
SCRIPTION OF THE HABITAT AND CIRCUMSTANCES U	UNDER WHICH THE INCIDENT OCCUI	RRED		
Unknown				
DITIONAL FACTORS				
only a very limited amount of in	nformation provided			
only a very limited amount of it	mormation provided.		Į	
			ļ	
ME OF PREPARER	SIGNATURE		DATE	
	1 , D	1 — .		
	- Life 3 1	-11. 13. m	6-9-99	
herm Blom ME OF SUPERVISOR	SIGNATURE, Mark	All -	DATE	20

CHEMICAL EMERGENCY RESPONSE SYSTEM 200 NORTH PALMETTO ST.

LEESBURG, FL 34748

CALLER INFORMATION

Log number:

051899-0003

Responder Name:

D. Pullum

Date call received:

5/18/199

Responder Number:

Time call received:

10:00 **EST** End time:

11:22

EST

Emergency Type

Personal Exposures?:

<u>No</u>

Exposure Type:

Incident time

Caller Fax:

N/A

2

Names of Individuals and

there condition:

None

Caller Name:

Caller Phone:

FARMER

Caller Location:

Caller's Organization:

MATERIAL INFORMATION

Manufacturer:

GALLARD SCHLESINGER

Trade Name:

ZINC PHOSPHIDE ON WHEAT

Product Code:

Material 1:

ZINC PHOSPHIDE ON WHEAT GRAIN

UN #:

Incident Description:

THE CALLER STATED THAT A NEIGHBOR HAD COMPLAINED THAT HIS DOGS WERE BLEEDING AFTER EATING RATS POISIONED WITH ZINC PHOSPHIDE COATED WHE! AS WELL AS THE WHEAT. THE CALLER STATED THAT HE HAD CONTACTED THE COUNTY AGENT AND THAT THE AGENT STATED THAT THIS WAS NOT A PROBLEM SINCE THE PRODUCT WAS SAFE. THE CALLER WANTED CONFIRMATION OF THIS.

SHIPPER INFORMATION

Was the shipper notified?

Shipper notification time: 00:00

Shipper Name:

Shipper Location:

Contact Name:

Is this a drop shipment:

Drop shipper Name: N/A

Carrier Name:

Trailer #:

Shipper Date:

PRO#:

Consignee Name:

Consignee Location:

This page was not found in 200890 9-002.

It updates 2003909-002

200 NORTH PALMETTO ST. LEESBURG,FL 34748

RESPONSE INFORMATION

First Aid Comments

NA

Remediation Comments: NA

Miscellaneous Comments: RESPONDER 2 READ THE MSDS DETAILS TO THE CALLER AND SUGGESTED THAT CALL A LOCAL VET AND THAT AN MSDS WOULD BE SUPPLIED TO THE VET. RESPONDER 2 INDICATED THAT SUCH DETAILS OF HOW THE DOGS WOULD BE AFFECTED WERE NOT IN OUR AREA OF EXPERTISE. IT WAS STATED THAT RATS, DOGS AND HUMANS ARE LIKELY TO HAVE THE SIMILAR REACTIONS DEPENDING O

BODY-CHEMICAL LOADING AND THAT THE PROBLEMS WITH THE DOGS MAY WELL

OF CONCERN.

CONTACTS

Was a physician notified? No

Physician Name: N/A

Was the Fire Dept notified? No

Fire Dept Name: N/A

Notifier:

N/A

Physician Location: N/A

Physician Phone:

Notification time: 00:00

Fire Dept location: N/A

NRC notification Time/Report: N/A

Is an NRC report required?

Is DOT 5800.1 required?

Additional contact 1: NA

Additional contact 2: NA

Additional contact 3: NA

This page was not found in 1008909



SUPPLEMENTAL COMMENTS

Notes: NA



R119469

Chemical: Sodium cyanide

Zinc phosphide (Zn3P2)

PC Code: 074002 088601

HED File Code: 15100 Other Incident Documents

Memo Date: 8/12/1999

File ID:

Accession #: 412-06-0192

HED Records Reference Center

4/22/2006